



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

little; to be able to adapt oneself gracefully to games of all kinds, and especially to out of door games; to have sufficient knowledge of botany to be able to take an intelligent interest in the trees, shrubs, and wild flowers, that are all around us; to be apt at all handicraft work. Don't misunderstand me, the nurse need not be brilliant at any of these, but she must be intelligently interested in them, for they are all valuable additions to her training. I know some nurses are afraid of injuring their professional reputation if they appear to have any other interest besides that of their work; they spend so much time in wrapping up their reputation in imaginary cotton-wool, that they have no time to acquire anything else. This is a mistake. I never hear a nurse say "I cannot do this," or "I cannot do that," for professional reasons, but I think her profession must have been prematurely born, or else in a very delicate condition.

Let us never think of ourselves as the finished product of some training school. I always disliked the term "trained nurse" for that very reason, it implied that we had passed through our training. We have passed through a valuable period of it, but we have still much to learn. A mushroom may spring up in the night, but it takes years to develop a nurse.

CARE OF HYPODERMICS

By AGNES MEYER, R.N.

Graduate of the City Hospital, Frankfurt, Germany

One of the most important problems, which has never been quite satisfactorily solved, is that of keeping hypodermics ready for immediate use. Though the danger of infection has been constantly impressed upon the pupil nurse, apparently no effort has been made to simplify the ordinary procedure. After studying various methods employed in different countries, the one in use in a German hospital seems to be the most practical and economical, the quickest and simplest.

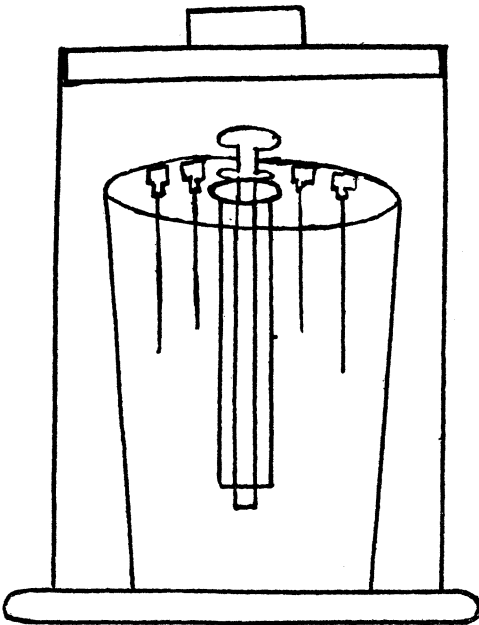
There they use a plain glass jar, with a tight-fitting ground-glass stopper, 3 to 4 inches high. Inside is a movable glass receptacle, with one large opening in the center for the hypodermic, and four small ones for the needles. The jar is filled with a solution made of sterile glycerine and 95 per cent alcohol, equal parts, leaving the top of the piston and the screw of the needles dry. Besides this, are used: (1) a jar of sterile sponges; (2) a small glass block with a depression, holding the same amount of fluid as the barrel of the syringe; (3) a bottle of ether.

Method of Using. Remove the cover of the glass jar, pour ether into the receiving block, empty the hypodermic properly, and fasten the

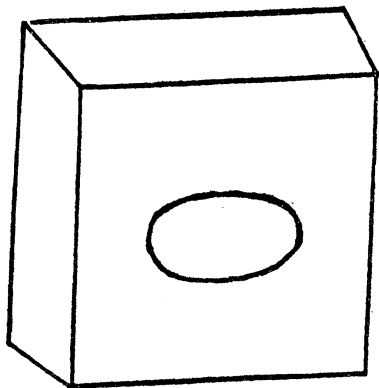
needle to it, draw up ether and syringe it back to be used again before replacing the hypodermic to the receptacle.

The advantages of this method are: (1) hypodermics are always ready for use on several people without delay; (2) the needles are kept sharp much longer, because the point never touches anything but the patient; (3) the solution used is sterilising. Glycerine is added to prevent the rusting of needles, which alcohol is apt to do, and ether dries the syringe and needle of the glycerine; (4) economy of time, only once a week the whole apparatus needs cleaning; (5) economy of material, fewer needles are required as they do not wear out as quickly. It is not necessary to waste expensive disinfectant in cleaning hypodermics before and after use, or in frequent changing of the solution used in the receptacle.

Unfortunately these containers are not made in the United States.



No. 1



No. 2